

FORM
5Rev
12/20State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402867099

Date Received:

01/21/2022

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and/or cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 47120

Contact Name: Christina Hirtler

Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6301

Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

Email: christina_hirtler@oxy.com

API Number 05-123-51419-00

County: WELD

Well Name: SHAKE

Well Number: 11-3HZ

Location: QtrQtr: SWNW Section: 11 Township: 4N Range: 68W Meridian: 6
FNL/FSL FEL/FWL

Footage at surface: Distance: 1895 feet Direction: FNL Distance: 719 feet Direction: FWL

As Drilled Latitude: 40.330320 As Drilled Longitude: -104.977199

GPS Data: GPS Quality Value: 1.9 Type of GPS Quality Value: PDOP Date of Measurement: 03/18/2021

** If directional footage at Top of Prod. Zone Dist: 2421 feet Direction: FNL Dist: 90 feet Direction: FWL
Sec: 11 Twp: 4N Rng: 68W** If directional footage at Bottom Hole Dist: 2501 feet Direction: FNL Dist: 474 feet Direction: FEL
Sec: 11 Twp: 4N Rng: 68W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 04/12/2021 Date TD: 09/24/2021 Date Casing Set or D&A: 09/26/2021

Rig Release Date: 10/03/2021 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 17715 TVD** 7022 Plug Back Total Depth MD 17699 TVD** 7021

Elevations GR 4993 KB 5013

Digital Copies of ALL Logs must be Attached



List All Logs Run:

CBL, LWD/MWD, (RES in API # 05-123-51415)

FLUID VOLUMES USED IN DRILLING OPERATIONS

(Enter "0" if a type of a fluid was not used. Do not leave blank.)

Total Fluids (bbls): 740

Fresh Water (bbls): 203

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 0

CASING, LINER AND CEMENT

<u>Casing Type</u>	<u>Size of Hole</u>	<u>Size of Casing</u>	<u>Grade</u>	<u>Wt/Ft</u>	<u>Csg/Liner Top</u>	<u>Setting Depth</u>	<u>Sacks Cmt</u>	<u>Cmt Btm</u>	<u>Cmt Top</u>	<u>Status</u>
CONDUCTOR	26	16	A52A	36.94	0	100	64	100	0	VISU
SURF	13+1/2	9+5/8	J-55	36	0	1923	716	1923	0	VISU
1ST	7+7/8	5+1/2	P-110	17	0	17715	1599	17715	1600	CBL

Bradenhead Pressure Action Threshold 577 psig

This threshold is calculated per Rule 308A.b.(2)G. If this well is located in a bradenhead test area (see Rule 207.b) per an Order of the Commission, it may be subject to a different threshold.

Does the casing centralization comply with Rule 317.g? Yes

If "NO", provide details below.

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom

Details of work:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PARKMAN	3,585				
SUSSEX	4,088				
SHANNON	4,676				
SHARON SPRINGS	7,028				
NIOBRARA	7,078				

Operator Comments:

Due to anti-collision needs and the variability of directional drilling, our as-drilled BHL could be different than the permitted
Per Rule 317.p Exception, Resistivity logs have been run on the Bake 11-18HZ, API # 05-123-51415
As-drilled GPS data was taken after conductor was set.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Christina Hirtler

Title: Regulatory Date: 1/21/2022 Email: christina_hirtler@oxy.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
402867134	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402867135	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
402884171	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
402867099	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402867121	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402867122	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402867124	PDF-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402867128	LAS-MWD/LWD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
402884176	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Permitting review complete.	01/21/2022
Permit	Return to draft: - Required field on Drilling tab not filled out - "Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls)" - List of Logs Run does not comply with "Reporting Logs Run" guidance.	01/19/2022

Total: 2 comment(s)